Appendix H

Financial Plan Form (Housing Only)

Appendix H Financial Plan

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								-						Unit #
														Name of Owner
														Occupant Name (if rental property) indicate if vacant or not
														Property Address
												•		(SB, Modular, MHU)
								-						Income
														Activity (rehab, recon)
														CDBG Cost
							9							Owner participation amount*
														Total Cost
														Lead Hazard Control (25% of Total Costs)(Pre 1978 Rehab only)
													- 1	Type of Assistance

^{*} If Ownerparticipation amount is based on cost of rehab, use cost of rehab only (w/o Lead Hazard Control cost) to determine require participation amount. NOTE: Lead Hazard Control should be budgeted only for units constructed prior to 1978 at 25% of total rehab costs.